

NEWS

For consumers and providers of in-home care services

Summer Issue ■ July 2005

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By Charles Reed, HCQA Chair

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As I write this article, I am preparing to attend the Washington State White House Conference on Aging. I have been asked to be the closing speaker for the Conference and to talk about where we go from here. To talk about where we go from here, I thought it would be beneficial to review what happened at past White House Conferences on Aging. This review will help us look to what the future may hold for our country as we all grow a little older.

The first White House Conference on Aging called by President Eisenhower was held in 1961. About 3,000 people attended the Conference to talk about a variety of issues. The major issues discussed were the need for the development of community programs for older persons and for some sort of national health care program to meet the needs of a growing aging population. As a direct result of the 1961 White House Conference on Aging, the Older Americans Act of 1965 was passed by the Congress, which required each state to set up a State Office on Aging. Congress also passed legislation creating the Medicare and Medicaid programs to provide much-needed health services for those who could not afford such care.

In 1971, a White House Conference on Aging was called by President Nixon. Again about 3,000 people attended the conference to make recommendations on how to improve services and programs for older persons in the United States. As a result of this conference, the Older Americans Act was amended to encourage states to divide into "Planning and Service Areas" (PSA) and to contract with local entities that would become the Area Agency on Aging (AAA). The role of the AAA was to plan for the type of services needed by older persons in their "Planning and Service Area" and to advocate for needed services. In the mid 70ies the Older Americans Act was also amended to provide funding for nutrition programs and senior centers for older persons.

President Carter called for the 1981 White House Conference on Aging that was presided over by incoming President Reagan, and it was the first one I attended. The big topic of discussion was President Reagan's plan to change the Social Security program. Most delegates were not very supportive of the proposed changes. Sen. Claude Pepper of Florida, seen by many as the champion of issues for older persons, led the opposition to Reagan's Social Security proposals by holding

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rallies and marches around the hotels where the White House Conference was held. Over 2,000 delegates attended the conference and made over 600 recommendations, but not much came from the recommendations. Also there were no real changes made to the Social Security as a result of the conference.

President Clinton called the White House Conference that was held in 1995. Again, over 2,000 delegates attended the conference and made a number of recommendations. The discussion dealt with: 1) keeping Social Security sound now and for the future, 2) preserving the integrity of the Older Americans Act and reauthorizing it in Congress, 3) preserving the nature of Medicaid, and 4) increasing funding for Alzheimer research.

In preparing for my talk to the State White House Conference on Aging on June 24, I reread the speech I heard President Clinton give at the opening of the 1995 White House Conference I attended in Washington, DC. What President Clinton said in his speech to the 1995 Conference seems appropriate to consider as we now prepare for the White House Conference on Aging in 2005. In his speech, President Clinton said to the delegates:

"Just one year after the last conference in 1982, for the first time in the history of the United States, older people are less likely to be poor than Americans under 65. In the full span of our country's history, that is a stunning change and remarkable achievement. We have seen it happening over the course of the past several decades. Since 1960, the poverty rate among elderly people has declined by 65%. It did not happen by accident, it happened because the American people kept faith with the social compact first forged 60 years ago when President Roosevelt signed the Social Security Act.

The compact has been strengthened over the last three decades with Medicare, with Medicaid, with cost of living adjustments for Social Security, with community-based services under the Older Americans Act like Meals on Wheels, transportation, with efforts to prevent abuse of the elderly. This is a remarkable record and you should be proud of it. It happened because people understood that their government could be made to work for them in a positive and strong way. And, it is something our country should be very proud of."

I am hoping that all who the attend the 2005 White House Conference on Aging keep the thoughts expressed by President Clinton in mind as they begin the debate and make recommendations that will provide guidance for the policies and programs effecting older persons for the years to come. I certainly will.

Upcoming Events

HCQA BOARD MEETINGS

The public is encouraged to attend

August 16, 2005

10:30am to 3:30pm 640 Woodland Square Loop SE Room 1-7.1 and 1-7.2 Lacey, WA

September 20, 2005

10:30am to 3:30pm Location TBA on HCQA website Lacey, WA

October 18, 2005

10:30am to 3:30pm 640 Woodland Square Loop SE Room 1-7.1 and 1-7.2 Lacey, WA

EVENTS

ADA: Past, Present and Future

July 26, 2005 11:30am to 4:00pm WA State Capitol Campus Legislative Building, Columbia Room Olympia, WA (360)407-3605 brounjm@dshs.wa.gov

Critical Issues for an Aging Society

WA Senior Lobby Fall Conference October 21, 2005 9:00am – 3:45pm SeaTac Hilton Conference Center 17620 Pacific Hwy South SeaTac, WA (360)754-0207 www.waseniorlobby.org

From the Director

By Mindy Schaffner, Executive Director

Independence Promoted Through Access to Referral Services

It is that time of the year again when we acknowledge and pay tribute to our independence as a sovereign nation. However, have you ever stopped to ponder the challenges for independence that people with disabilities and our aging seniors have to deal with on a daily basis? Issues of entrance into buildings, transportation, meeting basic personal needs and access to in-home service workers are but a few of the difficult issues that people with disabilities must face.

The desire to live independently in one's own home and community is an innate aspiration that most people want to attain. However, access to in-home services can be very limited, depending on the community in which you live. Access to in-home services is an important component of the state's Medicaid in-home program. These in-home services are provided by workers called 'individual providers.' Through public initiative I-775, the Home Care Quality Authority was directed to improve access to in-home services through the establishment of a referral registry of individual providers. The referral services provided through a registry database allow consumer/employers the opportunity to select workers based on their needs and preferences. These services promote individual independence and help fulfill the desire to remain in one's own home and community.

Last legislative session, the legislature directed the HCQA to "move forward with the implementation of a statewide referral registry system.." The HCQA is interested in exploring and developing private and public partnerships within local communities in order to expand the referral services statewide. If you have any ideas on local partnerships, or have an interest in being involved in the development of a referral services system in your area, please contact me at 1-800-580-4272 or at mschaffner@hcqa.wa.gov

Referral and Workforce Resource Center (RWRC)

South Sound Service Area

Employment Security Department 3738 Pacific Avenue SE Olympia, WA 98507 (360)407-5114

Coordinator: Barbara Traylor

Fourth Referral and Workforce Resource Center Begins Operations

In mid-May, the fourth Referral and Workforce Resource Center (RWRC) began serving consumers/employers and individual providers in the South Sound service area, covering Lewis, Thurston and Mason counties. Operated by Employment Security Department's WorkSource office, the RWRC staff immediately began making connections with community stakeholders to plan and develop programs. Their first advisory committee meeting was held June 14, 2005 and brought people together to share advice and guidance about professional development, recruitment and outreach, and peer mentorship.

RWRC staff participated in a two-day orientation training and have begun presenting at job fairs and other events. Individual providers and consumers/employers are encouraged to contact the South Sound RWRC to request an application to access the Referral Registry. They can be reached by calling 1-800-970-5456.

RWRC Advisory Council Participants:

Cherie Tessier, Norm Parks and Joyce Parks, *PAS-Port for Change*

Kate Sheffield, *PAS-Port for Change* and *WPAS*

Betty Schweiterman, WPAS

Sue Elliott, Arc of Washington

Suzanne Wall, SEIU Local 775

Stephanie Landaas, Brenda Carlstrom, Dennis Mahar and Patrick Farrell, HCQA Board Members

Paula Meyer and Shamim Bachelini, Department of Health

Madeleine Thompson, Workforce Training & Education Coordinating Board

Kristine Glasgow, Aging & Long Term Care of Eastern Washington

Sue Closser and Sharon Bowers, *Sunrise Services, Inc.*

Laurie Rockett, Gary Mersereau and Bonnie Ross, *Employment Security Department*

Dave Pavelchek and Candiya Mann, Washington State University

James Reddick, DSHS Children's Administration

Sue Poltl, DSHS Division of Developmental Disabilities

Cathy Cochran, DSHS Executive Administration

Steve Kozak, DSHS Division of Vocational Rehabilitation

Mindy Schaffner, Jackie Myers, Sherri Wills-Green and Jane Wood, HCQA staff

Referral Services Update

By Sherri Wills-Green, Referral Registry Program Manager

The pool of available individual providers enrolled in the Referral Registry database has almost doubled over the last two months. Operations in the Spokane RWRC (Spokane & Whitman counties), Northeast RWRC (Ferry, Stevens, & Pend Oreille counties) and Snohomish RWRC (Snohomish county) also continue to show a significant increase in the number consumers/employers who have submitted a request to find potential individual providers. The increased worker population, as well as increased utilization of referral services, reflects the recruitment efforts initiated by local registry coordinators in a variety of local settings including; newspapers, advocacy group newsletters, senior centers, churches and other public places. Registry Coordinators are also working with the Department of Social and Health Services (DSHS) and the Area Agency on Aging (AAA) case managers and social workers providing information explaining the benefits associated with using the Referral Registry database.

The South Sound RWRC (Lewis, Mason & Thurston counties) began operations in late May. Start-up activities include establishing relationships with existing local entities, selecting an advisory council, initiating recruitment efforts and developing the operational infrastructure needed to support the system operations.

On another note, an article highlighting the accessibility strategy used during the development of the Referral Registry will be published in early July on the Microsoft Accessibility Web site www.microsoft.com/enable. With the editing assistance of LaDeana McCoskey Huyler, manager of the Microsoft Accessibility Web site, the article gives an overview of the Referral Registry's accessibility and technical design elements. According to McCoskey Huyler, the Microsoft web site is visited by more than 600,000 people each month. For more information on the Referral Registry database, you may contact Sherri Wills-Green at 360-725-2520.

RWRC Advisory Council Provides Direction

A number of people gathered in Lacey on June 23, 2005 to hear about activities and plans for the RWRC sites—the second RWRC Advisory Council meeting. The group represented a mix of people from PASPort for Change, Washington Protection and Advocacy System, Department of Health, Service Employees International Union and the Department of Social and Health Services: Executive Administration, Children's Administration, and Division of Vocational Rehabilitation. The group was introduced to RWRC and HCQA staff, heard about progress on grant activities and provided direction on future activities. The next RWRC Advisory Council meeting is planned for September, 2005. For more information on the RWRC Advisory Council, contact Mindy Schaffner 1-800-580-4272 or at mschaffner@hcqa.wa.gov

Workers Compensation

By Jane Wood, Training and Communications Manager

The worker compensation program for individual providers averages just over twenty new claims per month. The majority of accident and injury claims that are reported result in "medical only" claims—meaning the injured person seeks medical attention and there is no resulting loss of work. For instance, in April 2005, 21 out of 24 new claims were medical only.

A relatively small number of claims are "indemnity" claims, meaning that in addition to medical costs, the injured person also cannot work for a certain period of time because of their injury. In April 2005, 3 out of 24 new claims were indemnity claims. These claims cost more because of the more serious nature of the injury or illness.

Sprains and strains are the leading injury suffered by workers. About one-third of sprains and strains are caused by lifting and carrying objects or people. HCQA focused a past newsletter on sprains and strains in hopes of raising awareness about how to minimize these types of injuries. The current safety newsletter, which was mailed to all individual providers at the beginning of July, 2005 focused on ways to prevent accidents and injuries during typical summer activities. To obtain a copy of the newsletter, or to share ideas for future safety newsletter articles, please contact Jane Wood at 1-866-580-4272 or jwood@hcqa.wa.gov.

Safety Training Update

By Jane Wood, Training and Communications Manager

It is amazing that over 6,000 individual providers (IP) have already completed safety training. It is anticipated that there will be a sharp increase in the number of people who complete the training as the course is now offered in conjunction with all Revised Fundamentals of Caregiving classes in Washington.

The HCQA wishes to express its gratitude to Sedgwick Claims Management Services and Professional Registry of Nursing, Inc. (PRN) for their efforts in revising the safety training so that it is more congruent with Revised Fundamentals of Caregiving. PRN also held workshops across the state to inform trainers about how to effectively present the curricula in their classrooms to individual providers.

Even though the *Safety Manual for Individual Providers* has been strengthened, there is still work to be done to make the manual accessible for non-English speaking individual providers. Our next phase of improvements include translating the manual into eight different languages.

The state of Oregon has adapted Washington's safety curriculum for their in-home workers—a manual was recently published and distributed. The safety curriculum has also been shared with several other states, who are considering it for adoption in their workers compensation and worker training programs.

REMINDER

As of July 1, 2005, *all new individual providers* (IP) must complete Safety Training within 120 days of working with their first DSHS consumer/employer.

Safety Training for new IPs will be offered at the end of each Revised Fundamentals of Caregiving course throughout Washington.

IPs who are *already employed* as of July 1, 2005 and those who are not required to take Revised Fundamentals of Caregiving can continue to complete Safety Training in the following three ways:

- 1. Read the Safety Manual for IPs; OR
- 2. Complete online at

http://hcqa.sedgwickcms.com; OR

3. Attend a Safety Seminar (courses are advertised in the Safety Newsletter and online at www.hcqa.wa.gov)

Call 1-800-416-1890 for a copy of the Safety Manual for Individual Providers.

Peer Mentor Program Begins in Six Counties

By Jane Wood, Training and Communications Manager

Since our last newsletter was published, there has been significant progress in getting the Peer Mentor program up and running in three Referral and Workforce Resource Center (RWRC) sites. The first several months were spent exploring how peer mentor programs work in various career fields. The strengths and weaknesses of an in-home system and how that applies to peer mentoring were analyzed. Input from across the state on how a peer mentor program could and should work in Washington was gathered. The result has been phenomenal and there has been seven individual providers who stepped up to serve as peer mentors. A training curriculum was also developed to educate peer mentors in the skills they need to support their colleagues in their local communities.

Each RWRC recruited, interviewed and selected at least two individual providers who are on the referral registry. The Spokane and Northeast Service Areas also selected an alternate peer mentor to fill-in during especially busy times and to assist all other peer mentors in those areas. The peer mentors are available by phone and email to any individual provider in their area on the referral registry; each provides up to twenty hours per month of mentoring activities. Peer Mentors began accepting calls from individual providers in June, 2005.

Additionally, all peer mentors received sixteen hours of training in four core areas: Leadership, Teaching and Coaching, Communication and Conflict Resolution. Using the skills in these areas, peer mentors spent time applying lessons learned to current challenges in caregiving—sharing past experiences and exchanging ideas on how to address certain challenges. A one-day refresher course is planned for June, 2006. For more information, contact Jane Wood at (360)725-2575 or at jwood@hcqa.wa.gov

RECRUITMENT VIDEO

HCQA recently developed a recruitment video for people who are interested in becoming an individual provider. Interviews of workers, their employers, board members and community members share their perspective about the importance of in-home services and describe the realities of the job—as well as what skills and abilities are necessary for new workers.

The video is currently being duplicated onto DVD for ease of distribution. Call (360)725-2575 or email jwood@hcqa.wa.gov to request a copy when it becomes available.

Introducing RWRC Peer Mentors

Stevens County: Marjorie Markin **Pend Oreille County:** Kathy Mondich

Northeast Service Area Alternate: Carla Phillips

Spokane/Whitman County: Hanan Nimri **Spokane/Whitman County:** Gladys Douglas

Snohomish County: Tracee Mitchell

HCQA in the Community

HCQA is honored to co-sponsor the upcoming *The Americans with Disabilities Act: Past, Present and Future* event organized by the Washington State Rehabilitation Council and other Governor-appointed councils and community organizations. The event commemorates the 15th anniversary of the signing of the Americans with Disabilities Act. Information about the event is listed on page two.

HCQA is also co-sponsoring a Safety and Continuing Education conference series this fall with Professional Registry of Nursing, Inc. The events will be held in King, Pierce and Chelan counties and are an opportunity for IPs to get ten hours of continuing education credit at one time and in one place. For a copy of the conference brochure, visit http://www.prninc.net/PRNINC/SafetyTraining.pdf